

TAX	Dollars	Cents
18 Enter amount from line 17	18	
19 Multiply line 18 by the low income tax credit decimal amount $__\ . ____ (_____\%)$ and enter here .	19	
20 Subtract line 19 from line 18	20	
21 Enter Child and Dependent Care Credit from federal Form 2441, line 9 \blacktriangleright _____ x 20% (.20)	21	
22 Income Tax Liability. Subtract line 21 from line 20. If line 21 exceeds line 20, enter zero	22	
23 Enter KENTUCKY USE TAX from worksheet in the instructions	23	
24 Add lines 22 and 23. This is your Total Tax Liability	24	
25 (a) Enter Kentucky income tax withheld as shown on attached 2002 wage and tax statements	25(a)	
(b) Enter 2002 Kentucky estimated tax payments	25(b)	
26 Add lines 25(a) and 25(b)	26	
27 If line 26 is larger than line 24, enter AMOUNT OVERPAID (see instructions)	27	
<i>See instructions for a detailed description of funds.</i> \blacktriangleright (Enter amount(s) checked)		
28 Nature and Wildlife Fund Contribution <input type="checkbox"/> \$2 <input type="checkbox"/> \$5 <input type="checkbox"/> \$10 <input type="checkbox"/> Other _____	28	
29 Child Victims' Trust Fund Contribution <input type="checkbox"/> \$2 <input type="checkbox"/> \$4 <input type="checkbox"/> Other _____	29	
30 Bluegrass State Games and U.S. Olympic Committee Fund Contribution	30	
31 Veterans' Program Trust Fund Contribution	31	
32 Add lines 28 through 31	32	
33 Amount of line 27 to be CREDITED to your 2003 ESTIMATED TAX	33	
34 Subtract lines 32 and 33 from line 27. Amount to be REFUNDED TO YOU	REFUND	34

TAX PAYMENT SUMMARY

35 If line 24 is larger than line 26, enter ADDITIONAL TAX DUE	35
36 (a) 2210-K penalty _____	(c) Late payment penalty _____
<input type="checkbox"/> Check if Form 2210-K attached	(d) Late filing penalty _____
(b) Interest _____	(e) Add lines 36(a) through 36(d). Enter here
	36(e)
37 Add lines 35 and 36(e) and enter here. This is the AMOUNT YOU OWE	OWE 37

Make check payable to **Kentucky State Treasurer**. Write your Social Security number and "KY Income Tax—2002" on the check. **Place on top of wage and tax statements on page 1.**

Attach a complete copy of federal Form 1040 if you received farm, business, or rental income or loss.	<input type="checkbox"/>	Yes	No
If you are not required to attach a copy of your federal return, check here	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I, the undersigned, declare under penalties of perjury that I have examined this return, including all accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. I also understand and agree that our election to file a combined return under the provisions of Regulation 103 KAR 17:020 will result in refunds being made payable to us jointly and in each of us being jointly and severally liable for all taxes accruing under this return.

Your Signature (If joint or combined return, both must sign.) _____ Spouse's Signature _____ Date Signed _____

Typed or Printed Name of Preparer Other than Taxpayer _____ I.D. Number of Preparer _____ Date _____ Telephone Number (daytime) _____

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Mail to: **REFUNDS** Kentucky Revenue Cabinet, Frankfort, KY 40618-0006.
PAYMENTS Kentucky Revenue Cabinet, Frankfort, KY 40619-0008.